



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

## \*BIBDATASHEET\*

CONFIRMATION NO. 1843

Bib Data Sheet

SERIAL NUMBER 09/966,686	FILING DATE 10/01/2001  RULE	CLASS 072	GROUP ART UNIT 3726	ATTORNEY DOCKET NO. S63.2-10142
-----------------------------	---------------------------------------	--------------	------------------------	---------------------------------------

APPLICANTS

Michael Austin, Tuam, IRELAND;

\*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/401,218 09/22/1999 PAT 6,360,577 *O.k. mj*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NONE mj*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 11/09/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Max J. Steinkraus</i> Examiner's Signature Initials	STATE OR COUNTRY IRELAND	SHEETS DRAWING 15	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------	-------------------------	-----------------------	----------------------------

*32* *4*

ADDRESS  
490  
VIDAS, ARRETT & STEINKRAUS, P.A.  
6109 BLUE CIRCLE DRIVE  
SUITE 2000  
MINNETONKA, MN  
55343-9185

TITLE  
A Method for Contracting, Loading or Crimping Self-Expanding and Balloon Expandable Stent Devices

FILING FEE  RECEIVED 1096	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------